PATENTETA

IAP& As a below named inventor, I hereby declare that:

- \	ventor, I hereby declare that:		
o 2006 My residence, post o	ffice address and citizenship are a	s stated below next to my name	2.
IA hliova I am tha ar	iginal, first and sole inventor (if our all names are listed below) of the invention entitled:	only one name is listed below) on the subject matter which is cla	or an original, first and aimed and for which a
Retraction Means	For Transcutaneous Device		
The specification of v	which (check only one item below	n)·	
[] is attached h		<i>,</i> -	
Application No1	0/566,795		
on January 31,	2006		
and was amended on			
[] was filed as PCT Number	international application		
on and was amended und			
on	er PC1 Afficie 19		
I hereby state that I including the claims,	have reviewed and understand as amended by an amendment ref	the contents of the above-iderred to above.	entified specification,
I acknowledge the daccordance with Title	uty to disclose information which 37, Code of Federal Regulations.	ch is material to patentability §1.56.	of this application in
application(s) for pate inventor's certificate of the United States of patent or inventor's cethan the United States	ty benefits under Title 35, Unite ent or inventor's certificate or of or of any PCT international appli America listed below and have entificate or any PCT international of America filed by me on the so which priority is claimed:	any PCT international applications(s) designating at least cations(s) designating at least calso identified below any fore application(s) designating at least came subject matter having a filing	ations(s) for patent or one country other than ign application(s) for east one country other
	FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLA	AIMS UNDER 35 U.S.C. 119:
COUNTRY (if PCT, indicated "PCT")	APPLICATION NUMBER	DATE OF FILING	PRIORITY CLAIMED
)	03388053.5	(day, month, year) 1 August 2003	UNDER 35 USC 119 [x] YES [] NO
S.	60/496,112	19 August 2003	[x]YES []NO
			[]YES []NO
			[]YES []NO
			[]YES []NO

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

Attorney's Docket Number:

(Includes Reference to PCT International Applications)

6710.204-US

I hereby claim the benefit under Title 35, United States Code '120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this applications is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, '112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal

Regulations, '1.56(a) whi	ch occurred between	een the filing date of the prior applica	ation(s) and the national or PCT international	filing date of this application	1:		
	PRIOR U	S. APPLICATIONS OR PCT INTE	ERNATIONAL APPLICATIONS DESIGNA UNDER 35 U.S.C. 120:	TING THE U.S. FOR BENE	EFIT		
U.S. APPLICATIONS				STAT	STATUS (Check one)		
U.S. APPLICATION NUMBER			U.S. FILING DATE	Patented Pending		Abandoned	
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	PCT	APPLICATIONS DESIGNATING	THEUS				
APPLICATION NO. FILING DATE		US SERIAL NUMBERS ASSIGNED (if any)					
PCT/DK2004/000516 30 July 2		30 July 2004			х		
id/or agent(s), to prosec	cute this application	on and transact all business in the F	ney(s) and/or agent(s) associated with Custor Patent and Trademark Office connected ther ie R. Wilk-Orescan, Reg. No. 45,220;	ewith. Reza Green, Reg.	No. 38,475: Rich	torney(s) nard W.	
Send Correspondence to: Reza Green, Esq. Novo Nordisk Pharmaceuticals, Inc. 100 College Road West Princeton, NJ 0840				Reza G	Direct Telephone Calls To: Reza Green (609) 987-5800		
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		LARATION FOR PATENT to PCT International Applica		ON AND POWER OF ATTORNE	Attorney's Docket Num	ber:	
5	Full Name of Inventor	Family Name	ations)	First Given Name	Second Giver	Name	
	Residence & Citizenship	City		State or Foreign Country	Country of C	Country of Citizenship	
	Post Office Address	Post Office Address		City	State & Zip	State & Zip Code/Country	
6	Full Name of Inventor	Family Name		First Given Name	Second Give	n Name	
	Residence & Citizenship	City		State or Foreign Country	Country of C	Country of Citizenship	
	Post Office Address	Post Office Address		City	State & Zip (Code/Country	
7	Full Name of Inventor	Family Name		First Given Name	Second Give	ı Name	
	Residence & Citizenship	City		State or Foreign Country	Country of C	itizenship	
	Post Office Address	Post Office Address		City	State & Zip (State & Zip Code/Country	
8	Full Name of Inventor	Family Name		First Given Name	Second Give	Second Given Name	
	Residence & Citizenship	City Post Office Address		State or Foreign Country	Country of C	Country of Citizenship State & Zip Code/Country	
	Post Office Address			City	State & Zip (
9	Full Name of Inventor	Family Name		First Given Name	Second Give	Second Given Name	
	Residence & Citizenship	City		State or Foreign Country	Country of C	Country of Citizenship	
	Post Office Address	Post Office Address		City	State & Zip	State & Zip Code/Country	
	further that th	ese statements were made with the k	nowledge that willfu	e are true and that all statements made on infone all false statements and the like so made are punish a false statements may jeopardize the validity of	hable by fine or imprisonment	, or both, under	
Date Date Date Date Date Date		ONR theselle		Signature of Inventor 3			
		6.08.17	2006.08. Signature of Inventor 5		Date Signature of Inventor 6	mature of Inventor 6	
					Date		
Signature of Inventor 7			Signature of Inventor 8		Signature of Inventor 9	Signature of Inventor 9	
Date		Date	Date 1		Date		
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